

GAU 1647



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February 15, 2001

Assistant Commissioner for Patents
Washington, DC 20231

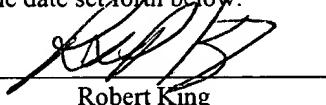
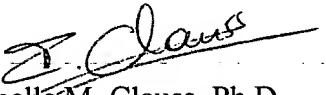
Re: U.S. Patent Application Serial No.: 09/181,311
Entitled: *In vitro Differentiation of Vascular Smooth Muscle Cells and Reagents Related Thereto*
By: Lee et al.; Filed: October 28, 1998
Examiner: Turner, S.; Group Art Unit: 1647
Attorney Docket No.: HUV-046.01 (formerly APV-382.01)

Dear Sir:

Enclosed for filing in the above-referenced patent application please find the following:

1. Fee Transmittal;
2. Response and Amendment;
3. Figures 6 and 9A (with additions in red noted thereon);
4. Check in the amount of \$54.00 for extra claims;
5. Petition for Three-Month Extension of Time;
6. Check in the amount of \$890.00 for the Extension of Time; and
7. Return receipt postcard.

The Commissioner is hereby authorized to charge any under-payments or credit any over-payments to our Deposit Account No. 06-1448.

| Certificate of First Class Mailing | Respectfully submitted, FOLEY, HOAG & ELIOT LLP |
|---|--|
| <p>I hereby certify that this correspondence is being deposited with the U.S. Postal Service as First Class Mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, DC 20231 on the date set forth below:</p> <p><u>February 15, 2001</u></p> <p>Date</p> <p></p> <p>Robert King</p> | <p></p> <p>Isabelle M. Clauss, Ph.D. Reg. No. 47,326 Attorney for Applicants</p> |



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the application of: Lee et al.

Serial No.: 09/181,311

Filed: October 28, 1998

For: *In vitro Differentiation of Vascular Smooth Muscle Cells and Reagents Related Thereto*

Examiner: Turner

Group Art Unit: 1647

Atty Docket No.: HUV-046.01
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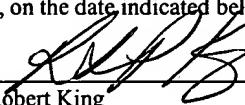
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February 15, 2001

Date of Signature and Mail Deposit

By: 
Robert King

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FEES CALCULATION SHEET/TRANSMITTAL OF RESPONSE TO OFFICE ACTION

Sir/Madam:

Transmitted herewith is a Response to Office Action, Petition for Three Month Extension of Time, and all applicable fees.

| | No. Claims after Amendment | | Highest No. Previously Paid For | EXTRA | | RATE | SMALL ENTITY | | OTHER THAN SMALL ENTITY | |
|---|----------------------------------|-------|---------------------------------------|-------|--|--------|---------------|----|----------------------------|----------------|
| | | | | | | | ADDT'L FEE | OR | RATE | ADDITIONAL FEE |
| TOTAL | 43 | MINUS | 40 | 3 | | x 9= | \$ | | x 18 = | \$54 |
| INDEP. | 11 | MINUS | 11 | 0 | | x 40 = | \$ | | x 80 = | \$0 |
| [] FIRST PRESENTATION OF MULTIPLE DEP. CLAIM | | | | | | +130 = | \$ | | x 260 = | \$0 |
| TOTAL ADDITIONAL | | | | | | FEE | \$ | OR | TOTAL | \$54 |

[X] Checks for \$ 54.00 for Extra Claims and \$ 890.00 for the Three Month Extension of Time are enclosed.

[X] Please charge any additional fees or credit any overpayments associated with this communication to our Deposit Account No. 06-1448.

Respectfully submitted,



Isabelle M. Clauss, Ph.D.
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Attorney for Applicants

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Date: February 15, 2001